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Navy and Marine Corps Medical News - #03-22
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Brother And Sister Brought Together By War
By Journalist 1st Class (SW) Stacey Moore, Fleet Hospital
Eight Public Affairs

ROTA, Spain - When Hospital Corpsman 3rd Class Lenora Inman arrived for work in the casualty receiving area of Fleet Hospital Eight (FH8) on May 22, she expected to have a routine evening helping the doctors and nurses admit 31 new casualties from Operation Iraqi Freedom. Instead, she got a big surprise when she looked at the roster of incoming patients. Her brother's name was on the list of casualties to be arriving at the hospital within minutes.

Inman's brother, Army Capt. Lawrence Foss, deployed to Iraq with 4th Infantry Division (M), Division Artillery, had been diagnosed with basal cell carcinoma for the second time. He was sent from his unit in Iraq to FH8 to have the carcinoma removed and tested by the fleet hospital staff.

"I didn't know he was coming until about 20 minutes before the bus arrived. Then I started freaking out," said Inman. "I was really nervous. It seemed unreal."

Neither knew exactly where the other was deployed in support of Operation Iraqi Freedom.

"They told me she was deployed to a field hospital. I did not know she was here. I thought she was in Kuwait," said Foss.

"I was sitting on the bus, and she came on. My first thought was, 'That person looks just like Lenora'," he said. "I was shocked. My jaw pretty much dropped. It was very cool, especially when I saw the grin on her face. It was like having home here."

Inman and Foss come from a large family with eight other brothers and sisters.

They have one other brother serving in the Army,

who is also deployed to Iraq.

Both siblings had the same thoughts and concerns about the possibility of Foss being injured and becoming a patient in the hospital where Inman works.

"I was really concerned that something would happen to one of us, and she'd have to see us coming through the hospital," said Foss.

"I wondered how it would feel if my brother came," Inman said about the possibility of Foss being one of the more than 800 patients treated at FH8. "I didn't know where he was. I just knew he was deployed."

The siblings, despite not seeing each other since their brother's wedding three years before in Illinois, still remain close. While not using much direct communication, they keep in contact through their mother and stepfather, Janice and Lonnie Oakley. All of the siblings have not been together in 10 years.

"We're actually quite close. When we're together, you can't tell we've been apart," said Foss.

They have used some of their time together in Rota to reconnect other family ties.

"We even called our Grandpa," said Inman.

Foss and Inman come from a military family with roots in both the medical field and the communications field. Their maternal grandmother was an Army nurse during WWII, their father a radio communicator during the Vietnam conflict, and two other siblings have been in the Army.

They were both happy to see each other, even under less than ideal circumstances.

"A war and cancer brought us together," said Foss.

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High School Students Make Drill Realistic By Bill Doughty, U.S. Naval Hospital Yokosuka Public Affairs

YOKOSUKA, Japan - Dozens of simulated casualties - many with horrible-looking injuries and covered in fake blood - writhe on the tarmac. It's another mass casualty drill at Yokosuka Naval Base, this one with a twist: the "victims" are students of the high school Junior Reserve Officer Training Corps (ROTC) program.

The scenario for the drill, held June 4 at Yokosuka's heliport, tested the hospital's mass casualty plan in the event of a major accident and explosion. Nearly three dozen students of the Junior ROTC wore special effects "moulage" - rubber and plastic wounds simulating burns, broken bones, and amputated limbs.

Several of the young "casualties" were asked to act psychotic. Screaming and attempting to run from the scene, they had to be chased down by firefighters and calmed down by health care responders.

"The high school students did a good job," said Lt.

Cmdr. Suzanne Haney, Medical Corps, head of pediatrics, who worked in the emergency room during the drill.

"It was very nice of them to come over and we really appreciate them helping us out," she said.

One student, freshman Brittanie Singer, got the full treatment - evacuation from the scene by firefighters, triage and treatment by the Special Medical Operations Response Team, secondary decontamination at the hospital, and a trip to the ER and OR.

"Everything seemed organized. Everything was organized there for me. The whole operating room - they had everything ready. I think they did a pretty good job," said Singer.

According to Haney, "I think it actually went very smoothly. I think probably in a real situation it's going to be a lot more crazy, maybe even a lot more patients, but this was very good training so we get an idea of what goes where and how it's supposed to work."

During mass casualty drills, the hospital is closed for all but urgent and emergent services. Training and drills are held frequently at U.S. Naval Hospital, Yokosuka, Japan, including at its branch clinics throughout mainland Japan.

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NH Jax Builds New Rooms For New Moms

By Sonar Technician 1st Class (SW) Luis Rosa, Naval Hospital Jacksonville Public Affairs

JACKSONVILLE, Fla. - Naval Hospital Jacksonville has undergone many renovations over the last year, all designed to improve service and care for patients. The latest project, which started in February, will provide new mothers and their babies private, state-of-the-art postpartum rooms.

"The 16 new postpartum rooms are designed to allow mothers to be with their babies without interruption and to afford our families the privacy they need during recovery," said Maternal Infant Unit (MIU) Department Head Lt. Cmdr. Nancy Dull, Nurse Corps. "Basically, a woman comes in, has her baby on the labor and delivery ward and then finishes her recovery with her baby in a private room," she explained.

"Of course, there will still be a nursery for babies who need a little bit of extra assistance and can't remain in the same room with their mother," Dull added.

The new postpartum rooms will be a significant improvement from the current conditions. Because of limited space and the age of the 1960s-era hospital facility, the current spaces are considered inefficient and offer little privacy. "The new rooms will have separate showers and new furniture along with a nursery

on the same floor."

Navy Surgeon General, Vice Adm. Michael L. Cowan, Medical Corps, has driven the commitment to offering state-of-the-art labor, delivery and postpartum care for beneficiaries as part of the Navy's Perinatal Care program.

"This is a much needed development that will allow women the opportunity to enjoy a new, comfortable environment during birth recovery," said Facilities Manager Larry Forbes. "These rooms will enable the hospital to provide our delivering mothers an equivalent level of comfort and quality care as civilian sector hospitals."

The new rooms are scheduled to open in September.

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Iwakuni Nurse Wins Patent for Medical Kit
By Bill Doughty, U.S. Naval Hospital Yokosuka Public Affairs

YOKOSUKA, Japan - With her severe allergies to wheat flour and cheese, the last thing baby Leah Narte needed was a bite of her brother's pizza. The resulting allergic reaction earned her an emergency response at the Branch Medical Clinic at Marine Corps Air Station Iwakuni in southern Japan.

Severe allergic reactions can send a person into anaphylactic shock, and cause a life-threatening shutdown of their airway. Luckily the Iwakuni Clinic now has pre-packed kits of information and medications, developed by Leah's father, Lt. Gino Narte, Nurse Corps.

Leah, like millions of people, is allergic to many different foods, pollen, and animals. In a severe reaction she becomes extremely swollen and itchy and has difficulty breathing.

"She's been taken to our Urgent Care Clinic about six times now," said Narte. "She almost died on me back in December 2001."

Back then, staff members had to look for medications stored separately and calculate dosages depending on the age, size, and severity of the patient. Now they grab a kit, tear it open and are ready to respond.

Adult kits and child kits are pre-packed with a dosage calculation sheet and all the medications needed. Healthcare providers evaluate the type and severity of the allergic reaction - mild, moderate, or severe - then follow the printed instructions. It saves a lot of time, Narte said.

"Time is important in response to an emergent allergic reaction, because you're concerned about their breathing, you're concerned about their airway," he said.

On May 16 Narte received notification and

certification from the Library of Congress that his pre-packed kits had been awarded a U.S. patent.

According to Branch Medical Clinic Iwakuni Officer-in Charge, Cmdr. Don Albia, Medical Service Corps, "It's really a true satisfaction for us - this little place - that a lot of folks are doing a lot of great things."

A command-wide philosophy of staff empowerment allowed the innovation to occur.

"The staff here knows they don't have any boundaries," said Albia. "All they have to do is reach out and set their sights. If it's something that's doable, if it's not against the rules, if it's not hurting anybody, then go for it."

Narte, who will leave Iwakuni soon after a three-year tour, notes that the new kits have helped the clinic reduce hospitalization costs and return adult patients back to work.

But what inspired him to create the innovative packets was his daughter.

"Since we came up with this, it's been great," he said. "She's been taken care of."

Narte hopes the packets will become known as "Leah Kits" and that they'll be used at other military treatment facilities.

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First Person: Lt. Michael S. Newman
By Naval Hospital Beaufort Public Affairs

BEAUFORT, S.C. - (Lt. Michael Newman, Medical Corps, USNR, is a flight surgeon currently stationed at Branch Medical Clinic, Marine Corps Air Station, Beaufort, S.C. These are his words about putting together his band Greezy Joe and the Cheap and Easy Band.)

I transferred to Beaufort about three and a half years ago and shared a house with several pilots. One of my housemates, Joe, and I started playing guitar together and wrote our first song when we went on cruise. Instead of lecturing our shipmates about proper conduct in a port city in Bahrain, we incorporated all the teaching into lyrics and music. It was very well received and we subsequently wrote about 15 more songs during and after the cruise.

We wanted to record our songs, but didn't have the money to buy studio time. One of our bedrooms became our studio, and we recorded songs one at a time whenever our military duties allowed. After nine or 10 months, our CD was completed. Two of the tracks have very special significance. The words to "Sail On" reflect the feelings about the families left behind during a cruise or deployment. "She's My Hero," praises a friend who is a female F/A-18 pilot.

The effort to find a market for the CD was a pure grass-roots effort. I sat at my computer and sent

messages to everyone I could think of. A local Savannah station, 98.7 - The River, was an initial and enthusiastic responder. The public reception of our songs really surprised and overwhelmed us.

Though we haven't been able to play live as much as we'd like to, we are amazed at all the attention we've received. We've already started writing songs for a second CD. I'll be leaving Beaufort in July to start an orthopedic residency at National Naval Medical Center in Bethesda, Md. Two other members of the band will be leaving in August for a tour aboard the USS Enterprise. It will be a challenge, but I'm certain that somehow we'll get it done.

Recently we played at a local rally in support of the troops deployed in Operation Iraqi Freedom. We also dedicated "She's My Hero" to former POW Pfc. Jessica Lynch and sent her a personal note and a copy of the CD. To date, the band has sold 600 copies and we anticipate selling many more. Proceeds from future sales will be donated to the Navy and Marine Corps Relief Society. More information can be found at our website, www.greezyjoe.com.

Interviewed by Naval Hospital Beaufort Public Affairs
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Healthwatch: Protect Yourself Against Skin Cancer
By Lt. Cmdr. James Polo, Medical Corps, Naval Hospital
Cherry Point

MARINE CORPS AIR STATION CHERRY POINT, N.C. - As the warmer weather approaches, we all look forward to spending more time outside, enjoying the recreational activities available in our community.

Hopefully, when you reach for your tennis racquet, golf clubs or running shoes, you are also reaching for your sunblock and wide brimmed hat.

With the incidence of all forms of skin cancer on the rise in our country, each of us must pay attention to how much and to what type of sunlight we are exposed.

The sun plays a major role in the three most common types of skin cancer. Basal cell carcinoma (BCC) is the most common form of skin cancer. It is estimated that over one million new cases of BCC will occur in the United

States this year. This slow growing tumor frequently occurs on sun-exposed skin of the face, neck and upper body. It will often appear as an enlarging bump that will bleed easily if rubbed or scratched.

Squamous cell carcinoma (SCC) is the second most common sun-related cutaneous malignancy. These tumors usually appear as persistent scaly or tender red bumps on sun exposed skin and can be quite extensive and invasive at the time of diagnosis.

Melanoma is the most serious form of sun related skin cancer. Our lifetime risk of developing melanoma has increased from 1 in 150 persons to 1 in 71 persons over the past 20 years. Sun exposure is a significant risk factor for developing melanoma, with blistering sunburns and outdoor summer jobs as a youth being identified as risk factors. A melanoma is characterized by a brown or black spot on the skin that changes in size, shape or color over weeks to months.

The American Academy of Dermatology has established the ABCD's of melanoma, which identify the warning signs of melanoma as Asymmetry, Border irregularity, Color variation and Diameter greater than a pencil eraser (6 mm). If treated early, thin melanomas are curable with simple surgery. If the diagnosis is delayed, melanomas can rapidly spread throughout the body.

Since the sun plays a major role in the development of skin cancer, the majority of skin cancer is preventable. Sunscreens and sunblock play a vital role in keeping our skin safe from the harmful wavelengths of light emitted by the sun.

Tanning of the skin results from the effects of two components of sunlight within the ultraviolet spectrum. UVB, abundant in sunlight, is responsible for burning the skin and inducing the tan many of us enjoy. UVA, present in a much lower percentage than UVB, penetrates more deeply in the skin, has greater effects on the genetic material, but causes less tanning.

For many years, sunscreens have been rated with an SPF or 'sun protection factor' that evaluated the product's ability to protect the skin from UVB. A properly applied sunscreen with an SPF of 30 would theoretically permit the wearer to remain in the sun 30 times longer before burning occurred.

Unfortunately, there is no similar scale for UVA and early products did not protect the skin from this type of light. Individuals who used these early sunscreens believed they were safe because they did not burn. In actuality, the increased exposure to UVA may have increased their risk of skin cancer.

Today, many sunscreens and sunblocks offer excellent UVB and UVA protection. Sunscreens labeled "broad spectrum UVA protection" with an SPF of 30 or greater are recommended for daily use. Sunblocks, most of which contain small metal particles, reflect the sunlight and offer the broadest and most complete protection from the sun.

Here are some recommendations for protecting yourself when from the sun's harmful rays:

- Wear a broad-brimmed hat
- Use a broad-spectrum UVA sunscreen or sunblock with an SPF of at least 30
- Reapply sunscreen or sunblock frequently, even if it claims to be waterproof

- Avoid the midday sun
- Wear sunscreen beneath light cotton clothing

Gone are the days of drugstore displays for 'dark tanning oils' and 'sun tan lotion'. Public awareness of the risks related to sun exposure has increased dramatically over the past several years and this awareness will hopefully have an impact on the incidence of skin cancer in our country.

Know the example we set matters. More than 80% of our lifetime sun exposure occurs before the age of 18! If we use sunscreen and wear a hat, our children are more likely to do the same.

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Got news? If you'd like to submit an article or have an idea for one, please contact MEDNEWS at 202-762-3221, fax 202-762-1705 or btbadura@us.med.navy.mil.